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#### **COVER LETTER**

SUBJECT: THE BABY CAVE LLC Name of Limited Liability Company DOCUMENT NUMBER: L18000216889 The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing. Please return all correspondence concerning this matter to the following: United States Corporation Agents, Inc. Name of Person Legalzoom.com, Inc. Name of Firm/Company 101 North Brand Blvd. 11th Floor Address Glendale, CA 91203 City/State and Zip Code raresignations@legalzoom.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Kasandra Lund Name of Person

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn

### MAILING ADDRESS:

limited liability company.

Registration Section

Division of Corporations

TO:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

#### STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ons of section 605.0115, Florida	Statutes, the undersigned	•		
United States Corporation Agents, Inc.			hereby resigns as		
	Name of Registered Agent		· · · · ·		
Registered Agent for_	THE BABY CAVE LLC	<del>-</del>			_
	Name of Limited Liability	Company			<u>_</u> .
L18000216889					
Document N	umber, if known				
	ion was mailed to the above listed and the office discontinued on the discontinued on				
If signing on behalf of an entity:		3 <u>7</u> i	20.		
Cheyenne Moseley		- CK	20 J		
	Typed or Printed Name			<u> </u>	
Asst. Secretary for United States Corporation Agents, Inc.			<del></del>		
	FILING FEES: \$ 85.00 Active li	mited liability company	E. FLORIDA	2020 JAH   4 PM 5: 40	
		ratively dissolved/volun-	arily dissolved/		

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

withdrawn limited liability company